Filing Fee: \$150.00



State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE CORPORATIONS DIVISION 100 NORTH MAIN STREET PROVIDENCE, RI 02903-1335

Corp. 1.D. # 103 85

BUSINESS CORPORATION

ARTICLES OF INCORPORATION

The un General Laws corporation:	dersigned acting as incorporator (s) of a corporation under Chapter 7-1.1 of the , 1956, as amended, adopt(s) the following Articles of Incorporation for such
First:	The name of the corporation is Leah F. Adams, M. D., Inc.
(A close com	oration pursuant to §7-1.1-51 of the General Laws, 1956, as amended) (strike if inapplicable)
SECOND:	The period of its duration is (if perpetual, so state)Pernetual
THIRD:	The purpose or purposes for which the corporation is organized are:
corporations State of Rhode	de medical services including the provision of all services incidental to transact any lawful business for which professional service may be incorporated under Chapter 7-5.1-1 of the General Laws of the Elsland and to have all the powers conferred upon professional rations thereunder.

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statement that all of such shares are to be without par value.)

All shares are to be without par value.

:

or

(State (A) the number of shares of each class thereof that are to have a par value and the par value of each share of each such class, and/or (B) the number of such shares that are to be without par value, and (C) a statement of all or any of the designations and the powers, preferences and rights, including voting rights, and the qualifications, limitations or restrictions thereof, which are permitted by the provisions of title 7 of the General Laws in respect of any class or classes of stock of the corporation and the fixing of which by the articles of association is desired, and an express grant of such authority as it may then be desired to grant to the board of directors to fix by vote or votes any thereof that may be desired but which shall not be fixed by the articles.)

FIFTH: Provisions (if any) dealing with the preemptive right of shareholders pursuant to §7-1.1-24 of the General Laws, 1956, as amended:

Sixth: Provisions (if any) for the regulation of the internal affairs of the corporation:

Mark C. Ouellet	at such address is: (add Zip Code)
	Signature of registered agent
as directors until the first annual meeting of and shall qualify are:	constituting the initial board of directors of the nes and addresses of the persons who are to serve shareholders or until their successors are elected 7-1.1-51 of the General Laws, 1956, as amended, state the on.)
<i>Name</i> Leah F. Adams	Address
Janice Adams	400 Scituate Avenue, #10, Cranston, RI 0292 44 Charles Street, East Providence, RI 02914
Nisth: The name and address of each Name Leah F. Adams Beverly R. Quellet	Chincorporatoris: **Address** 400 Scituate Avenue, #10, Cranston, RI 02921 1119 Reservoir Avenue, Cranston, RI 02910
TENTH: Date when corporate existen filing of these articles of incorporation):	ce to begin (not more than 30 days after filing
Oc 10 BOL 28, 1998	
Dated Conser 28, 19 98	Signature of each incorporator Signature of Cach incorporator Smul Lulled

City In the Country of PROVIDENCE In the Transform In said Country this
COUNTY OF PROVIDENCE J THE
in said County this 28th day of UCTOBEN , A.D. 1998
then personally appeared before me Leah F. Adams and Beverly R. Ouellet
each and all known to me and known by me to be the parties executing the foregoing instrument,
and they severally acknowledged said instrument by them subscribed to be their free act and
deed.

Notary Public
Mark C. Quellet
My Commission Expires: 06/12/01



(415) 397-9700 (800) 652-1051 (907) 563-3414 (in Alaska)

CERTIFICATE OF INSURANCE

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or after the coverage afforded by the policy below.

Name and Address of insured

Lealt F. Adams, MD. Inc. 450 Veterans Memorial Parkway, Suite # 8B East Providence, Rhode Island 02914

Policy Number	the second	Limits of Liability	Annual Policy Period As of 12:01 a.m. local time	
613095		1,000,000 each staim	Effective Date:	10/ 27/98
		3,000.000 aggregate	Expiration Date:	01/01/99
	Ì	N/A deductible	Retro Date:	10/27/98

Current Medical Specialty: 9014- Internal Medicine- No Surgery

Certificate Holder

Secretary of State
100 North Main Street
Providence, Rhode Island 02903

This is to certify that the policy of insurance listed above has been issued to the insured named above for the policy period indicated. The insurance afforded by the policy described herein is subject to all the terms, exclusions and conditions of such policy. Should the above policy be canceled before the expiration date, NORCAL will endeavor to mail 10 days written notice to the certificate holder named above, but failure to provide such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. The policy provides that it is the responsibility of the insured to inform recipients of Certificates of Insurance of any changes in coverage or termination or cancellation of the policy.

By: NORCAL Mutual Insurance Company

Date:

10/27/98

Via Fax: 438-9037

DAVID R. HOLLEY, M.D.

Secretary